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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.
		First Inventor
		Title
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		
<p><input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status.</p> <p>See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> Specification [Total Pages <u>14</u>] (preliminary amendment set forth below) <ul style="list-style-type: none"> - Detailed description of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p><input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>10</u>]</p> <p>5. Oath or Declaration [Total Sheets <u>2</u>] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) <ul style="list-style-type: none"> Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(j)(2) and 1.36(e). </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.:</p>		
ADDRESS TO: Denis Gleason Dock Leveler with Dual Function Hydraulic Mechanism		
<p>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies </p>		
ACCOMPANYING APPLICATION PARTS		
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS/PTO-1449) <input type="checkbox"/> Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other:</p>		

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner: _____
 For CONTINUATION or DIVISIONAL APPS only. The entire disclosure of the prior application, from which any oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.
 The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number:	<input type="checkbox"/> Correspondence address below		
Name	DENIS GLEASON % NORDOCK INC.		
Address	375 WARD STREET		
City	PORT HOPE	State	ONTARIO
Country	CANADA		
Name (Print/Type)	DENIS GLEASON		Registration No. (Attorney/Agent)
Signature	<i>[Signature]</i>		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 375)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	DENIS GLEASON
Examiner Name	
Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number _____
 Deposit Account Name _____

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 to the above-identified deposit account

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity - Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051	65	Surcharge - late filing fee or oath	
1052 50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053	130	Non-English specification	
1812 2,520		2,520	For filing a request for ex parte reexamination	
1804 920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251	55	Extension for reply within first month	
1252 410	2252	205	Extension for reply within second month	
1253 930	2253	465	Extension for reply within third month	
1254 1,450	2254	725	Extension for reply within fourth month	
1255 1,970	2255	985	Extension for reply within fifth month	
1401 320	2401	160	Notice of Appeal	
1402 320	2402	160	Filing a brief in support of an appeal	
1403 280	2403	140	Request for oral hearing	
1451 1,510	1451	1,510	Petition to institute a public use proceeding	
1452 110	2452	55	Petition to revive - unavoidable	
1453 1,300	2453	650	Petition to revive - unintentional	
1501 1,300	2501	650	Utility issue fee (or reissue)	
1502 470	2502	235	Design issue fee	
1503 630	2503	315	Plant issue fee	
1460 130	1460	130	Petitions to the Commissioner	
1807 50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806	180	Submission of Information Disclosure Stmt	
8021 40	8021	40	Recording each patent assignment per property (times number of properties)	
1809 750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801	375	Request for Continued Examination (RCE)	
1802 900	1802	900	Request for expedited examination of a design application	

SUBTOTAL (1) (\$ 375)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
16	-20* = -4	X	=	
	- 3* =	X	=	

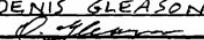
Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ —)

** or number previously paid, if greater; For Reissues, see above

Other fee (specify) _____	SUBTOTAL (3) (\$ —)
*Reduced by Basic Filing Fee Paid	

(Complete if applicable)

Name (Print/Type)	DENIS GLEASON	Registration No. (Attorney/Agent)	Telephone 905-885-4276
Signature			Date AUGUST 9, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Nordock Inc.
375 Ward St. Unit #5
Port Hope, Ontario
L1A 4A4

NORDOCK INC. 

August 9, 2003

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA
22313-1450

Dear Sir or Madam:

Please find enclosed an application for a Non-Provisional Patent titled "Dock Leveler With Dual Function Hydraulic Mechanism". I am the inventor and the creator of the document and the principle owner of Nordock Inc. where I want all correspondence to be directed. Nordock Inc. will be paying the appropriate fees and I have included a credit card payment form.

Included with this letter:

Utility Patent Application Transmittal
Fee Transmittal
Credit Card Payment Form
Specification
Drawings
Declaration

Trusting that everything is in order.

Yours truly,



Denis Gleason